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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Applicat	1092	mber
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER EXTRA					1	0.77		}			
BASIC FEE				-Ci Callon	1	RATE	FEE	1	RATE	FEE	
	CFR 1.16(a)) TAL CLAIMS					┨		<u> </u>	OR		1
	CFR 1.16(c)) EPENDENT CLA		minus 50 «			1	X 5 =	·	O R	x \$ c	
	CFR 1.16(b))		minus 3 = '		• • • • • • • • • • • • • • • • • • • •].	X 1 =		OR	X \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						ŀ	+s=		OR	+5 E	
"If the difference in column 1 is less than zero, enter "O" in column 2.						•	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											L
	(Column 1) (Column 2) (Column 3)						SMALL E	NTITY	OR	OTHER	R THAN ENTITY
<		REMAINS		HIGHEST MUMBER	PRESENT]	RATE	ADDI-			
AMENDMENT		AFTER AMENDME	м	PREVIOUSLY PAID FOR	EXTRA	١		TIONAL FEE	,	RATL	TIONA,
	OT CER 1, 16(C)	1.6	Minus	70	بند ا] -	x 1=	1	OR	X S E	FEE
ÆN	Independent (37 CFR 1.16(a))	12	Minus	- 4	-	Γ	X 1 =		OR	X1 c	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(4))						+; =		OR	+1 .	/
						•	TOTAL . ADO'L FEE		OR	TOTAL ADD'L FEE	/
(Column 1) (Column 2) (Column 3)							•			,000,000	
AMENOMENT B		CLAIMS RENVANIN AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		rate	ADDI- TIONAL FEE
	Total Or CFR 1.16(cm	ilo	Minus		=		x s =		OR	X 8 =	722
EN C	Enzypendent (3) CFR 1,16(H)	. 3	Minus	•••	=	ĺ	X \$	*	OR	X \$_ =	
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3) OFR 1.16(d))						+:		OR OR	+; =	
						l	TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
		(Column 1)	<u> </u>	(Column 2)	(Column 3)		`			,	
DMENT C		CLAIMS REMAININ AFTER AFECTIVE	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Trigit (3) CFA 1.16(c))	•	l.Sinus	•	=		X \$ =		OR	X1 =	
AMENDA	Independent Of CFR 1,16(H)	•	Minus	***	•		X \$ =		OR	x \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+5 -		OR		•
									,	TOTAL	
* If the entry in culumn 1 is less than the entry in column 2, write '0' in column 3.											
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

The Thighest Number Previously Paid For (NTHIS SPACE is less than 3, enter "T".

The Thighest Number Previously Paid For (Total or independent) is the Nichest number found in the appropriate bow in column 1.

This oblication of internation is required by 37 CFR 1.16. The information is required to obtain or return a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to lake 12 nitruities to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Thre will rary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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